

COMMERCIAL INVOICE

Invoice No.: _____

Date: _____

Exporter / Shipper

Consignee

Notify Party

Port of Loading: _____

Port of Discharge: _____

Country of Origin: _____

Final Destination: _____

No.	Description of Goods	HS Code	Quantity	Unit	Unit Price	Total Value

Subtotal _____

Freight _____

Insurance _____

Total Invoice Value _____

Currency: _____

Authorized Signature & Company
Stamp

Name: _____

Date: _____